## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together was applicable fee(s), to: Mail Mail Stop ISSU

Mail Stop ISSU EE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used correspondence including debelow or directed of tions.	for transmitting the ISSI ng the Patent, advance o herwise in Block 1, by (	JE FEE and PUBLICAT rders and notification of r a) specifying a new corres	ION FEE (if require maintenance fees wil spondence address; a	ed). Blocks 1 through 5 s il be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPOND  23117  NIXON & VA	Feel pap have	(s) Transmittal. This ers. Each additional perists own certificate of Certificate.	certificate cannot be used paper, such as an assignment in a ling or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must smission g deposited with the United			
901 NORTH GI ARLINGTON, '	LEBE ROAD, 11TH VA 22203	80	tran	hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				· · · · · · · · ·		(Depositor's name)	
		W.	- A. A. Eliza	· · · · · · · · · · · · · · · · · · ·		(Signature)	
		JAN BAC				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	. A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/584,796 06/01/2000		Fredrik Lindqvist	R1/11/2R1	0 FMOHAMM1 00000006	4990		
TITLE OF INVENTION	: FREQUENCY DOMA	IN ECHO CANCELLER	L .				
				01 FC:150 02 FC:800	1	1510.00 OP 9.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	01/13/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
JAMAL, ALEXANDER 2614			379-406080	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the p		Nivon	& Vanderbye P C	
Change of correspondence address (or Change of Correspondence			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	pe)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Telefonaktiebolaget LM Ericsson (publ) Stockholm, Sweden							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 🖾 Соп	poration or other private gr	oup entity Government	
4a. The following fee(s)	are submitted:	41	b. Payment of Fee(s): (Plea	ise first reapply any	previously paid issue fee	shown above)	
☑ Issue Fee       ☐ A check is enclosed.         ☑ Publication Fee (No small entity discount permitted)       ☑ Payment by credit card. Form PTO-2038 is attached.							
Advance Order -		permitted)		<ul> <li>☑ Payment by credit card. Form PTO-2038 is attached.</li> <li>☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).</li> </ul>			
<del></del>			overpayment, to Depo	sit Account Number	14-1140 (enclose a	in extra copy of this form).	
	s SMALL ENTITY state	is. See 37 CFR 1.27.			. ENTITY status. See 37 C		
NOTE: The Issue Fee an interest as shown by the i	d Publication Fee (if requestroyed State	uired) will not be accepte tes Patent and Trademark	d from anyone other than to Office.	he applicant; a registe	ered attorney or agent; or t	he assignee or other party in	
Authorized Signature	A6 J4	dove		Date Janu	uary 8, 2010		
Typed or printed name	John R. La	istova		Registration No.	33,149		
This collection of inform	ation is required by 37 C	FR 1.311. The information	on is required to obtain or r	etain a benefit by the	public which is to file (an	d by the USPTO to process)	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.